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CONFIRMATION NO. 7034

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|--|---|--------------------------------|---|--|
| <b>SERIAL NUMBER</b><br>10/593,217   | <b>FILING OR 371(c) DATE</b><br>09/15/2006<br><b>RULE</b>   | <b>CLASS</b><br>514            | <b>GROUP ART UNIT</b><br>1623   | <b>ATTORNEY DOCKET NO.</b><br>891-A-PCT-US |
| <b>APPLICANTS</b><br>Ivan King, North Haven, CT;<br>Mario Sznol, Woodbridge, CT;<br>Michael Belcourt, Wallingford, CT;<br>Li-Mou Zheng, Orange, CT;  |   |                                |   |  |
| <b>** CONTINUING DATA *****</b><br>This application is a 371 of PCT/US05/10152 03/25/2005 which claims benefit of 60/556,565 03/26/2004  |   |                                |   |  |
| <b>** FOREIGN APPLICATIONS *****</b>   |   |                                |   |  |
| <b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED** SMALL ENTITY **</b><br>** 10/23/2007  |   |                                |   |  |
| Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no<br>35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance |   | <b>STATE OR COUNTRY</b><br>CT  | <b>SHEETS DRAWING</b><br>0  | <b>TOTAL CLAIMS</b><br>20                  |
| Verified and Acknowledged<br>Examiner's Signature _____ Initials _____   |   | <b>INDEPENDENT CLAIMS</b><br>9 |   |  |
| <b>ADDRESS</b><br>Law Offices of Albert Wai-Kit Chan<br>World Plaza, Suite 604<br>141-07 20th Avenue<br>Whitestone, NY11357  |   |                                |   |  |
| <b>TITLE</b><br>COMBINATION THERAPY COMPRISING CLORETAZINE   |   |                                |   |  |
| <b>FILING FEE RECEIVED</b><br>900  | FEES: Authority has been given in Paper<br>No. _____ to charge/credit DEPOSIT ACCOUNT<br>No. _____ for following: |                                | <input type="checkbox"/> All Fees<br><input type="checkbox"/> 1.16 Fees ( Filing )<br><input type="checkbox"/> 1.17 Fees ( Processing Ext. of time )<br><input type="checkbox"/> 1.18 Fees ( Issue )<br><input type="checkbox"/> Other _____<br><input type="checkbox"/> Credit |  |